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34313 7590 09/24/2004

ORRICK, HERRINGTON & SUTCLIFFE, LLP
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Lynne Fulmer (Depositor's name)
Lynne Fulmer (Signature)
November 23, 2004 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/750,800	01/02/2004	Richard S. Ginn	704117.4008	1825

TITLE OF INVENTION: LUNG ASSIST APPARATUS AND METHODS FOR USE

11/29/2004 MBIZUNE2 00000119 150665 10750800

01 FC:2501 685.00 DA
02 FC:1504 300.00 DA
03 FC:8001 9.00 DA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$685 XXX	\$300	\$985 XXX	12/27/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
SNOW, BRUCE EDWARD	3738	623-023640

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Orrick, Herrington &
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Ensure Medical, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Sunnyvale, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
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- ☐ A check in the amount of the fee(s) is enclosed.
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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature James W. Geriak

Date November 23, 2004

Typed or printed name James W. Geriak

Registration No. 20,233

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